

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup> Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
CAMPAIGN DISCLOSURE

**COMMITTEE NAME** (Must be same as on Statement of Organization)

CITIZENS FOR STRUYK

2008 MAY 1

DR-2M 3:45  
(Rev. 07/2007) DISCLOSURE REPORT

For Office Use Only

Comm # 5 1416

Logged In \_\_\_\_\_

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Computer \_\_\_\_\_

Audited \_\_\_\_\_

IMPORTANT: Indicate by # type of committee you are reporting for: 2

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC  
(11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name  
DOUG STRUYK

Political Party (if applicable)  
REPUBLICAN

Office Sought  
IOWA HOUSE OF REPRESENTATIVES

District (if Senate or House)  
99

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

*William Hunter*

712 566-3213

5/19/08

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A MAY 14, 2008

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

11/4/08

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the  
committee. This amount **MUST** be the same as the cash on hand at the end  
of the last reporting period or must be zero if this is first report filed.)

\$ 38,770.29

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

6,950.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 45,720.29

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

6,395.35

Schedule F: Loan Repayments total (Attach Schedule F)

39,324.94

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

		ONE HARRAH'S CR			
1/9/08	ID# 8431	CK# 6032	KOCHPAC 655 15TH ST, NW WASHINGTON, DC 20005	500.00	<input checked="" type="checkbox"/>
1/9/08	ID# 6099	CK# 0940	MEREDITH CORP 1716 LOCUST DES MOINES, IA 50309	100.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 3425	

TOTAL (if last page of this schedule)

\$ 3425

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the  
committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by  
marriage). If surname of contributor is the same as candidate, but there is no  
familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

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## CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS FOR STRUYK

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1/3/08	ID# CK#	MARIE KNEDLER 17683 LOCHLAND RIDGE COUNCIL BLUFFS, IA 51503		\$125	<input checked="" type="checkbox"/>
1/9/08	ID# 6082 CK# 1310	MIDAMERICAN ENERGY CO EFFECTIVE GOVERNMENT COMMITTEE 666 GRAND AVE		500.00	<input checked="" type="checkbox"/>
1/9/08	ID# 6250 CK# 2395	IOWA CABLE PAC 8350 HICKMAN RD, STE 2 CLIVE, IA 50325		250.00	<input checked="" type="checkbox"/>
1/9/08	ID# CK#	STEVE SCHOENEBAUM 1671 NW 132ND ST CLIVE, IA 50325		200.00	<input checked="" type="checkbox"/>
1/9/08	ID# 6096 CK# 2042	MANUFACTURED HOUSING PAC 1400 DEAN AVE DES MOINES, IA 50316		500.00	<input checked="" type="checkbox"/>
1/9/08	ID# 9768 CK#	AMERISTAR PAC		500.00	<input checked="" type="checkbox"/>
1/9/08	ID# 6073 CK# 1090	IOWA MEDICAL PAC 1001 GRAND AVENUE W DES MOINES, IA 50265		250.00	<input checked="" type="checkbox"/>
1/9/08	ID# C00239947 CK# 2595	HARRAH'S ENTERTAINMENT, INC IMPACTS PUBLIC POLICY ONE HARRAH'S CR		500.00	<input checked="" type="checkbox"/>
1/9/08	ID# 8431 CK# 6032	KOCHPAC 655 15TH ST, NW WASHINGTON, DC 20005		500.00	<input checked="" type="checkbox"/>
1/9/08	ID# 6099 CK# 0940	MEREDITH CORP 1716 LOCUST DES MOINES, IA 50309		100.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 3425

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

CITIZENS FOR STRUYK

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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1/9/08	ID# CK#	STEPHEN ROBERTS 666 WALNUT SUITE 2500 DES MOINES, IA 50309		\$50.00	<input checked="" type="checkbox"/>
1/9/08	ID# CK#	F. RICHARD THORNTON 3667 GRAND AVE, #3 DES MOINES, IA 50312		100.00	<input checked="" type="checkbox"/>
1/9/08	ID# 6033 CK# 1122	EMC CO PAC 717 MULBERRY ST DES MOINES, IA 50309		150.00	<input checked="" type="checkbox"/>
1/9/08	ID# 9687 CK# 1111	GRINNELL MUTUAL REINSURANCE PAC 4215 HIGHWAY 146 GRINNELL, IA 50112		150.00	<input checked="" type="checkbox"/>
1/9/08	ID# 6052 CK# 3215	INDEPENDENT INSURANCE AGENTS OF IOWA 4000 WESTOWN PKWY, STE 200		100.00	<input checked="" type="checkbox"/>
1/9/08	ID# 6118 CK# 2504	IOWA OPTOMETRIC ASSOC 1454 30TH STREET, STE 204 W DES MOINES, IA 50266		150.00	<input checked="" type="checkbox"/>
1/9/08	ID# 6101 CK# 3744	TRUCK PAC IOWA P.O. BOX 6121 E DES MOINES STN DES MOINES, IA 50309		300.00	<input checked="" type="checkbox"/>
1/9/08	ID# 6146 CK# 1753	HOMEBUILDERS ASSOC PAC DES MOINES, IA		250.00	<input checked="" type="checkbox"/>
1/9/08	ID# 6021 CK# 002186	CREDIT UNION PAC P.O. BOX 10409 DES MOINES, IA 50306		1000.00	<input checked="" type="checkbox"/>
1/9/08	ID# 6067 CK# 3810	IOWA HEALTH PAC 6750 WESTOWN PKWY, #100 W DES MOINES, IA 50266		500.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$2750

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

MONETARY  
RECEIPTS☐ CHECK THIS BOX IF  
AMENDING FORM**COMMITTEE NAME** (Must be same as on Statement of Organization)

CITIZENS FOR STRUYK

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1/9/08	ID# 6070 CK# 3574	IOWA LAWPAC 521 E LOCUST DES MOINES, IA 50309		\$100.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 100.	
TOTAL (if last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

MONETARY  
RECEIPTS☐ CHECK THIS BOX IF  
AMENDING FORM**COMMITTEE NAME** (Must be same as on Statement of Organization)

CITIZENS FOR STRUYK

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1/12/08	ID# 6046 CK# 4396	JUSTICE FOR ALL PAC 218 6TH AVE, STE 526 DES MOINES, IA 50309		\$100.00	<input checked="" type="checkbox"/>
1/12/08	ID# CK#	HELENE MOSSMAN 24 NORWOOD CT COUNCIL BLUFFS, IA 51503		50.00	<input checked="" type="checkbox"/>
1/12/08	ID# CK#	DON SCOTT 306 SPENCER COUNCIL BLUFFS, IA 51503		50.00	<input checked="" type="checkbox"/>
1/12/08	ID# 5201 CK# 10590	WAL PAC 702 SW 8TH ST BENTONVILLE, AR 72716		250.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 450.

TOTAL (if last page of this schedule)

\$

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

MONETARY  
RECEIPTS☐ CHECK THIS BOX IF  
AMENDING FORM**COMMITTEE NAME** (Must be same as on Statement of Organization)

CITIZENS FOR STRUYK

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
2/4/08	ID# CK#	RODNEY EARLYWINE 15519 BOBBY LANE COUNCIL BLUFFS, IA 51503		\$100.00	<input checked="" type="checkbox"/>
4/29/08	ID# CK#	GENE GRIMSLEY 1221 MILITARY AVE COUNCIL BLUFFS, IA 51503		125.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 225.

TOTAL (if last page of this schedule)

\$ 6950.

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(for Schedule A)

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES:** NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

CITIZENS FOR STRUYK

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/19/08	ID# CK# 1249	CAPITAL RESOURCES 700 EAST PLEASANT ST P.O. BOX 257 BROOKLYN, IA 52211	COMMISSION ON FUNDS RAISED, REIMBURSEMENT FOR MILEAGE, POSTAGE,	\$ 1653.56
2/1/08	ID# CK# 1250	CB ONLINE 300 W BROADWAY #265 COUNCIL BLUFFS, IA 51503	WEBSITE HOSTING	90.00
2/21/08	ID# CK# 1251	ACYPL 2131 K STREET, NW WASHINGTON, DC 20037	CONTRIBUTION	200.00
2/21/08	ID# CK# 1252	CAPITAL RESOURCES 700 EAST PLEASANT ST P.O. BOX 257 BROOKLYN, IA 52211	COMMISSIN ON FUNDS RAISED & REIMBURSEMENT FOR MILEAGE	166.80
2/21/08	ID# CK# 1253	COUNCIL BLUFFS ONLINE 300 W BROADWAY, #265 COUNCIL BLUFFS, IA 51503	DOMAIN FEE	35.00
2/26/08	ID# CK# 1254	JILL STRUYK 219 CARSON COUNCIL BLUFFS, IA 51503	REIMBURSEMENT FOR POSTAGE, CELL PHONES & BIRTHDAY CARDS	571.00
3/4/08	ID# CK# 1255	STRUYK TURF LTD 19933 VIRGINIA HILLS RD COUNCIL BLUFFS, IA 51503	MOBILE PHONE REIMBURSEMENT, JANUARY	241.10
3/4/08	ID# CK# 1256	STRUYK TURF LTD 19933 VIRGINIA HILLS RD COUNCIL BLUFFS, IA 51503	MOBILE PHONE REIMBURSEMENT, FEBRUARY	147.89
SUB-TOTAL				\$ 3105.35
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

CITIZENS FOR STRUYK

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4/10/08	ID# CK# 1257	CB ONLINE 300 W BROADWAY #265 COUNCIL BLUFFS, IA 51503	WEBSITE HOSTING	\$ 90.00
5/8/08	ID# CK# 1258	REPUBLICAN PARTY OF IOWA 621 E 9TH DES MOINES, IA 50309	DONATION	3000.00
5/14/08	ID# CK# 1259	ACYPL 2131 K STREET, NW WASHINGTON, DC 20037	DONATION	200.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 3290.
TOTAL (if last page of this schedule)				\$ 6395.35

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

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Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(I).)

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